U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

The same of the sa		
1. File Number U - UISG	2. Fiscul Year Covered From: 200 CA.	
The case of the control years	1 / 3 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name CHRIS STANLEY	Name PLUMBERS AND PIPE FITTERS LOCAL UNION NO. 553	
	Labor Organization File Number	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 51.71 OLD ALTON-EDW RD	Street 2 SOUTH WESLEY DRIVE	
City EDWARDSVILLE	City EAST ALTON	
State Illinois ZIP Code + 4 62025	State 1111nois ZIP Code + 4 62024-2097	
5. Position in labor organization.  BOARD MEMBER		
monetary value from an employer whose employees your of gar. 23116 6. Name and address of Employer (including trade name, if any).  Name AMSCO MECHANICAL  Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income.  AMSCO GAVE CHRIS A GIFT CERTIFICATE TO APPLEBEES WORTH \$25. AMSCO EMPLOYS LOCAL 553 MEMBERS.	
P.O. Box, Bldg., Room No., if any		
Street 2201 ADAMS STREET	7.b. Amount.	
City GRANITE CITY	\$25	
State Illinois ZIP Code + 4 62040		
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
signed Chin Stauling		

Name of Person Filing CHRIS STANLEY	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
Name and address of Business (including trade name, if any).	9. Business deals with:	-		
Name	gunitario			
Trade Name, if any:	a. Labor Organization			
P.O. Box, Bldg., Room No., if any	b. Trust			
Street	c. Employer			
City				
State ZIP Code + 4				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name		erneadh an amhairtean a Stagaige an tagaige an an		
Trade Name, if any:		eniaesi Wandi Russagas		
P.O. Box, Bldg., Room No., if any				
Street				
City	<ul><li>11.b. Approximate dollar value of such dealing.</li><li>12.a. Nature of interest held or income received.</li></ul>			
State ZIP Code + 4				
	12.b. Amount.			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	Contraction and to be delicated as because a second contract contract and contract		
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			
turn description of Employment Em				

	Name of Person	Filing	CHRIS	STANLEY
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File Number U-

Part A Continuation Page				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name LOELLKE PLUMBING	LOELLKE GAVE CHRIS A \$50 GIFT CETIFICATE TO TONY'S RESTAURANT. LOELLKE EMPLOYS LOCAL 553 MEMBERS.			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street #6 CROSS COUNTY COURT				
City JERSEYVILLE	\$50			
State III inois ZIP Code + 4 62052-2585	·			
A. Held an interest in, engaged in transactions (including loans) with, or derived	income or other accomonic honofit of manetacy valve from an amalysis where			
employees your organization represents or is actively seeking to represent.	moone of other economic behelf of monetary value from all employer writese			
<ol><li>Name and address of Employer (including trade name if any).</li></ol>	7.a. Nature of Interest, Transaction, or Income.			
Name KANE MECHANICAL	KANE MECHANICAL PAID FOR CHRIS TO HAVE A DINNER FOR 2 WITH DRINKS. KANE EMPLOYS LOCAL 553 MEMBERS.			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street 170 EAST ALTON AVE	7.0.7 WHOLILE			
City EAST ALTON	\$50			
State Illinois ZIP Code + 4 62024				
A Held an interest in congred in transaction (i.e.).				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount,			
Street				
City				
State ZIP Code + 4				

Form LM-30 (2003)